

<b>SCC eFile</b>	<b>2014 ANNUAL REPORT</b> <b>COMMONWEALTH OF VIRGINIA</b> <b>STATE CORPORATION COMMISSION</b>	214500493				
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME:  <b>REPUBLIC MORTGAGE INSURANCE COMPANY OF NORTH CAROLINA</b></p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:  <b>JOSEPH E BLACKBURN JR</b>  <b>300 W MAIN ST</b>  <b>RICHMOND, VA</b></p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE:  <b>RICHMOND CITY</b></p> <p>4.) STATE OR COUNTRY OF INCORPORATION:  <b>NC</b></p> </div> <div style="width: 35%;"> <p>DUE DATE: <b>1/31/2014</b></p> <p>SCC ID NO: <b>F1612904</b></p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>6,000,000</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	COMMON	6,000,000
CLASS	AUTHORIZED					
COMMON	6,000,000					
6.) PRINCIPAL OFFICE ADDRESS:  <div style="text-align: center;"> <p>ADDRESS: 101 N. CHERRY STREET</p> <p>CITY/ST/ZIP: WINSTON-SALEM, NC 27101</p> </div>						
7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.						
NAME: KEVIN JOHN HENRY TITLE: PRESIDENT ADDRESS: 150 RIDGE GATE COURT CITY/ST/ZIP/CO: LEWISVILLE, NC 27023	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR				
NAME: DAVID CHRISTOPHER CASH TITLE: VP & CFO ADDRESS: 4113 ALLISTAIR RD. CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27014	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR				
NAME: JOHN EDEL GERKE TITLE: VP & TREASURER ADDRESS: 1331 KNEBWORTH LN. CITY/ST/ZIP/CO: CATAWBA, NC 28609	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR				
NAME: JOEL PASTERNAK TITLE: VP & SECRETARY ADDRESS: 4109 CHERRY LAUREL LN CITY/ST/ZIP/CO: WINSTON SALEM, NC 27106	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR				
NAME: CHRISTOPHER STEPHEN NARD TITLE: CEO, CHAIRMAN ADDRESS: 600 HILL RD. CITY/ST/ZIP/CO: WINNETKA, IL 60093	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR				
NAME: CRYSTAL ELLIOTT MARTIN TITLE: ASST SECRETARY ADDRESS: 101 BROOKVALLEY RD CITY/ST/ZIP/CO: KING, NC 27021	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR				

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DEANA MCINNIS VICKERS ASST SECRETARY 135 CORBRIDGE LN. WINSTON-SALEM, NC 27106	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JIMMY ALLEN DEW DIRECTOR 407 RIVERBEND DR ADVANCE, NC 27006	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SPENCER LEROY, III DIRECTOR 2089 BLACKSTONE AVENUE LAGRANGE, IL 60525	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ALDO CHARLES ZUCARO DIRECTOR 126 NANTUCKET LN BARRINGTON, IL 60001	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.					
/s/ JOEL PASTERNAK SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JOEL PASTERNAK, VP & SECRETARY PRINTED NAME AND CORPORATE TITLE	11/25/2013 DATE			
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.					